



12-13-05

AT-12684/91

ATTORNEY DOCKET NO. 19109,0020U2
APPLICATION NO. 09/712,788

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Finley et al.

Application No.: **09/712,788**

Filed: **November 14, 2000**

For: **"AUDIO REQUEST INTERACTION
SYSTEM"**

Confirmation No.: **8889**

Group Art Unit: **2654**

Examiner: **David Knepper**

TRANSMITTAL LETTER

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

NEEDLE & ROSENBERG, P.C.
Customer Number 23859

December 12, 2005

Sir:

Transmittal herewith is/are the following in the above-identified application:

- | | | | |
|-------------------------------------|----------------------------|-------------------------------------|--------------------------|
| <input checked="" type="checkbox"/> | Amendment | <input checked="" type="checkbox"/> | Petition to Extend Time |
| <input checked="" type="checkbox"/> | Fee as calculated below | <input type="checkbox"/> | Supplemental Declaration |
| <input type="checkbox"/> | No Additional Fee Required | <input type="checkbox"/> | Terminal Disclaimer |
| <input type="checkbox"/> | Corrected Drawings | <input type="checkbox"/> | Other <u>Postcard</u> |

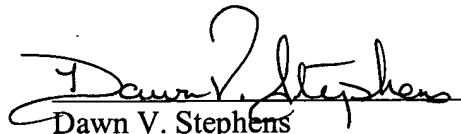
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDITIONAL FEE
Total Claims	14	14	0	X \$50.00		\$
Independent Claims	3	3	0	X \$200.00		\$
<input type="checkbox"/> First Presentation of a Multiple Dependent Claim				+ \$360.00		\$
EXTENSION FEE	1 st Month \$120 <input type="checkbox"/>	2 nd Month \$450 <input type="checkbox"/>	3 rd Month \$1020 <input checked="" type="checkbox"/>	4 th Month \$1590 <input type="checkbox"/>	5 th Month \$2160 <input type="checkbox"/>	\$1020.00
<input type="checkbox"/> Reduction by 1/2 for filing by SMALL ENTITY (Note 37 C.F.R. §1.9, §1.27, §1.28) -						-\$
TOTAL FEE DUE						\$1020.00

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Payment:

- ☐ A check in the amount of \$_____ is enclosed.
- ☒ Payment by credit card in the amount of \$1020.00 for the fees designated below. (Form PTO-2038 enclosed).
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.
- ☐ The Commissioner is authorized to charge our Deposit Account No. 14-0629 in the amount of \$_____ to cover the above-listed additional fees. A duplicate copy of this transmittal is enclosed.
- ☒ In the event of an overpayment or improper payment of a required fee, the Commissioner is authorized to charge or credit our Deposit Account No. 14-0629 as required to correct the error.

NEEDLE & ROSENBERG, P.C.


Dawn V. Stephens
Registration No. 44,355

NEEDLE & ROSENBERG, P.C.
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